

## City of Hampton

## **TEXT AMENDMENT APPLICATION**

City Hall 17 East Main Street South PO Box 400 Hampton, GA 30228

Phone: 770.946.4306 Fax: 770.946.4356 www.hamptonga.gov

MAYOR ANN N. TARPLEY

MAYOR PRO-TEM MARTY MEEKS

CITY COUNCIL SHEILA BARLOW HENRY BYRD DEVLIN CLEVELAND MARY ANN MITCHAM

> **CITY MANAGER** ALEX S. COHILAS

WILLIE TURNER

Name of Applicant:	Tel.:		
Mailing Address:	Email:		
Name of Property Owner:	Tel:		
(APPLICANT NAMED ABOVE AFFIR	S THAT THEY ARE THE OWNER OR AGENT OF THE OWNER OF TH		
PROPERTY DESCRIBED BELOW AN	EQUESTS; ATTACH ADDITIONAL PAGE FOR MORE THAN ONE OWNER)		
Amendment Requested:			
	Signature of Applicant(s)		
Printed Name of Witness	Printed Name of Applicant		
Notary	Signature of Agent		
NOTARY STAMP:			
(For Office Use Only)			
Total Amount Paid \$ Cash:	Check #: Received by: (FEES ARE NON-REFUNDABLE)		
Application checked by:	Date: Pre-application review:		
Date of review / meeting with City staff:	Staff Recommendation: Council Decision:		
Director's Signature:	_ Date:		

## **DISCLOSURE OF CAMPAIGN CONTRIBUTIONS**

(Required by Title 36, Chapter 67A, Official Code of Georgia Annotated)

Reference: Application filed on	, 20	, to amend the official City of
Hampton Code of Ordinances descri	ribed as follows:	
\$250.00 or more to each member of	d official position of the local government	on who will consider the Application and
Yes No		
• •	y representing the applicant must file () days after this application is first filed	the following information with the City of d:
City Council Member Name	Dollar amount of Campaign Contribution	Description of Gift \$250 or greater given to City Council member
I hereby depose and say that all sta and belief.	tements herein are true, correct and c	omplete to the best of my knowledge
Signature of Applicant		
Sworn to and subscribed before me		
Thisday of, 20	<u>_</u> .	
Notary Public	_	